

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R15 / 5-19) Indiana Election Division (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? Yes

(CFA-4) **Summary Sheet**

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPOR

COMMITTEE INFORMATION	No Constitution		Property and the
Full Name of Committee (as on Statement of Organization) Check if this is a new	name	SACIONEAN THEORY	AREA INTO COLOR
Michelle Martin for County Council 2	name.		
(765) 25		mittee Telephone Number	
		52-7267	
Mailing Address (Address where all campaign finance correspondence is received.) 11956 W 00 NS	Check if this is a ne	w address.	
5. City, State, ZIP Code	6. Party Affiliation (if applicable)		
Russiaville, IN 46979	Democratic		
CANDIDATE INFORMATION (For Candidate's	Committees Only		ACCURATE FOR
7. Full Name of Candidate (Include any nickname.) Michelle Elaine Martin	Party Affiliation or If Independent Candidate Democratic		Candidate
Office Sought (Include district number, if any. Not required for exploratory committee.) Howard County Council District 2	10. County of Residence Howard		
TYPE OF REPORT		CONVENTION	CANDIDATES ONL
11. Check one:		Check one: Pre-Convention	
Pre-Primary Pre-Election Annual Nomination Other			
Final / Disbands Committee (Lines 18, 19, and 20 must be 10".) Outgoing Treasurer (Within ten (10) days amend Statement of Organization.)		Post-Conve	ention
1.1.4.0000		OLUMN A nis Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		0.00	
14. Cash on hand and investments January 1, current year.		Mark Town	0.00
CONTRIBUTIONS AND RECEIPTS	Service Control		THE REPORT OF
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)	MPS		
15a. Itemized (Use Schedule A.)		0.00	0.00
15b. Uniternized		0.00	0.00
15c. Add lines 15a and 15b in both columns. SUBTOTAL		0.00	0.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B.	TOTAL	0.00	0,00
EXPENDITURES			
(Note: These amounts include in-kind expanditures and loan repayments.)	TOTAL DE		THE WALL
17a. Itemized (Use Schedule B.) (Public Question: use Schedule C.)		0.00	0.00
17b. Unitemized		0.00	0.00
	STOTAL	0.00	0.00
18. Cash on hand and investments at close of this reporting period (Subtract 17c from 16 in both columns.)	TOTAL	0.00	0.00
19. Debts OWED BY the committee (Use Schedule D.)		0.00	WILL THE SET T
20. Debts OWED TO the committee (Use Schedule E.)		0.00	但这种类型
CERTIFICATION		Sand Sand For	OFFICE USE ONLY

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE. Title Date (mm/dd/yy) 08/05/22 Treasurer Signature of Candidate (if applicable) Date (mm/dd/yy) 08/05/22

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Level 6 felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeenor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

FILED

SEP 0 8 2022

DEBBIE STEWART Clerk Howard Cir. Court